04/09/2009 15:30

Image# 29991914365

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

	FOI AII A	dinorized Comm	iiilee		1	Office Use Only	
NAME OF COMMITTEE (in full)	USE FEC MAIL OR TYPE OR F		ample:If typing, t er the lines	ype			
Bob Alexander for Co	ongress	1 1 1 1 1 1	1 1 1 1			1 1 1 1 1 1	
<u> </u>				1 1 1 1 1		1 1 1 1 1 1	
ADDRESS (number and s	street) 1429 Some	rset Close	1 1 1 1 1	1 1 1 1 1			
•	1						
Check if differen than previously reported. (ACC)	East Lansir	g , , , , ,			MI	48823	
2. FEC IDENTIFICATIO	ON NUMBER ▼	CITY 🛕		S	TATE 🛋		DE ▲ E ▼ DISTRICT
C00448365		3. IS THIS REPORT	NEW (N)	OR	X AMEND (A)		
	arterly Report (Q1)	(b) 12-Day PRI	E-Election Report Primary (12P Convention (1		General (12		Runoff (12R)
	arterly Report (Q2) Quarterly Report (Q3)	Election on				in the State o	of .
January 31	Year-End Report (YE)	(c) 30-Day PO	General (30G		Runoff (30	R)	Special (30S)
Termination	n Report (TER)	Election on				in the State o	of
5. Covering Period	07 17	2008	through	0 9	3 0	2008	
I certify that I have examine	Lilda I	best of my knowledg Patricia Curran	e and belief it is	true, correct a	nd complete.		
Type or Print Name of Tre Signature of Treasurer NOTE: Submission of fals	Electronically Filed by	Hilda Patricia Cu		Da		0 9 enalties of 2 U.S.	2 0 0 9 .C 437g.
Office Use Only FE5AN018						FEC FOR (Revised 02/2	

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Bob Alexander for Congress 1 **7** ° D 0.7 2008 09 2008 Report Covering the Period: 3 0 From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 49757.00 108486.92 (other than loans) (from Line 11(e))..... (b) Total Contribution Refunds 0.00 25.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 49757.00 108461.92 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 66620.15 117592.31 (from Line 17)..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 117592.31 66620.15 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 1569.61 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 8700.00 Schedule C and/or Schedule D)..... For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003) Page 3 Write or Type Committee Name **Bob Alexander for Congress** ° D 0 7 2008 09 2008 3 0 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 11542.00 38577.89 (i) Itemized (use Schedule A)..... 24590.00 56284.03 (ii) Unitemized..... (iii) TOTAL of contributions 36132.00 94861.92 from individuals..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 13625.00 13625.00 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 49757.00 108486.92 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 1700.00 10700.00 (b) All Other Loans..... (c) TOTAL LOANS 1700.00 10700.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 51457.00 119186.92

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS Total This Period Election Cycle-to-Date 66620.15 117592.31 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of all Other Loans..... (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other 0.00 25.00 Than Political Committees..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS 0.00 25.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS..... 22. TOTAL DISBURSEMENTS 66620.15 117617.31 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 16732.76 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 51457.00 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... 68189.76 25. SUBTOTAL (add Line 23 and Line 24)..... 66620.15 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 1569.61 (subtract Line 26 from Line 25).....

	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 81 (check only one) X
\ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Julie Horn Alexander Mailing Address 1429 Somerset Close		Date of Receipt 0 8 0 4 2 0 0 8
	City East Lansing	State Zip Code MI 48823	Transaction ID: SA11AI.5673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer State of Michigan Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Administrator Election Cycle-to-Date 450.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) William Alexander Mailing Address 5968 Park Lake Road,	Apt. 237	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.5604
	East Lansing	MI 48823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Retired	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	
_	Full Name (Last, First, Middle Initial) James Anderson		Date of Receipt
	Mailing Address 968 Roxburgh Ave		09 12 2008
	City	State Zip Code	Transaction ID: SA11Al.6168
	East Lansing FEC ID number of contributing federal political committee.	MI 48823	Amount of Each Receipt this Period 2300.00
	Name of Employer Michigan State Univ	Occupation Professor of History	Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	Spending (2 U.S.C. 441a(i)/441a-1)
	SUBTOTAL of Receipts This Page (optional)		2750.00

ľ	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any pers	FOR LINE NUMBER: PAGE 6 / 81 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	e name and address of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Linda Anderson Mailing Address 2338 Hulett Rd. City Okemos FEC ID number of contributing federal political committee.	State Zip Code MI 48864	Date of Receipt M M
	Name of Employer Michigan State University Receipt For: 2008 Primary X General Other (specify) ▼	Occupation retired Election Cycle-to-Date 500.00	ActBlue Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
— В.	Full Name (Last, First, Middle Initial) James P. Bebermeyer Mailing Address 1063 Lilac Ave.		Date of Receipt 0 9 1 6 2 0 0 8
	City	State Zip Code	Transaction ID: SA11AI.6186
	East Lansing FEC ID number of contributing federal political committee.	MI 48823	Amount of Each Receipt this Period 250.00
	Name of Employer retired Receipt For: 2008 Primary X General Other (specify) ▼	Occupation retired Election Cycle-to-Date 750.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial)		Date of Descipt
).	Thomas Bird Mailing Address 1132 Sabron Drive		Date of Receipt M M M
	City	State Zip Code	Transaction ID: SA11AI.6148
	East Lansing FEC ID number of contributing federal political committee.	MI 48823	Amount of Each Receipt this Period 250.00
	Name of Employer Michigan State University Receipt For: 2008	Occupation Professor Election Cycle-to-Date	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	250.00	
Γ	SUBTOTAL of Receipts This Page (optional) .		1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate sol for each category Detailed Summa	y of the
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Bob Alexander for Congress	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Nancy Bosak		Date of Receipt
Mailing Address 6015 Winans Drive		0 7 3 1 2 0 0 8
City	State Zip Code	Transaction ID: SA11Al.5607
Brighton	MI 48116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Michigan Democratic Party	Occupation Voter File Manager	Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		250.00
Full Name (Last, First, Middle Initial) Frieda S. Brown		Date of Receipt
Mailing Address 1866 Hamilton Rd,	Apt. D 14	09 10 2008
City	State Zip Code	Transaction ID: SA11AI.6120
Okemos	MI 48864	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Retired Michigan State Un-	Occupation Prof of French	Limit Increased Due to Opponent's
ivers Receipt For: 2008	Election Cycle-to-Date	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		750.00
Full Name (Last, First, Middle Initial) Linda Byers-Blacksmith		Date of Receipt
Mailing Address 209 W. Downie Stre P. O. Box 453	et	0 8
City	State Zip Code	Transaction ID: SA11AI.5891
Alma	MI 48801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Owner	Occupation Property Management	Limit Increased Due to Opponent's
Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼		450.00
	l	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 8 / 81 (check only one) X 11a 11b 11c 11d 11d 13b 14
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Statements may not be sold e name and address of any	d or used by any persor y political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Irene Cahill Mailing Address 4087 Brookstone City Howell FEC ID number of contributing federal political committee.	State Zip Co MI 48843		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer City of Lansing Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Forester Election Cycle-to-Date	e ▼ 225.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Carolyn Callen Mailing Address 501 McPherson Ave.			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Co MI 48915		Transaction ID: SA11AI.5774
Lansing FEC ID number of contributing federal political committee.	MI 48915		Amount of Each Receipt this Period 100.00
Name of Employer Retired Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Admin Asst to Dire Election Cycle-to-Date		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) John J. Carver			Date of Receipt
Mailing Address 5833 Community Dr.			09 / 24 / 2008
City	State Zip Co		Transaction ID: SA11AI.6366
Brighton FEC ID number of contributing federal political committee.	MI 48116		Amount of Each Receipt this Period 500.00
Name of Employer self Receipt For: 2008 Primary X General Other (specify) ▼	Occupation developer Election Cycle-to-Date	e ▼ 500.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)	1		650.00

	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 81 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Statements may not be sold or used by any persole name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Judith Daubenmier Mailing Address 4490 Lakeshort Ct.		Date of Receipt
	City Brighton	State Zip Code MI 48116	Transaction ID: SA11AI.5681 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer University of Michigan Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Lecturer Election Cycle-to-Date ▼ 575.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Glen C. Davis, M.D. Mailing Address 1273 Cambria Dr.		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.5762
	East Lansing	MI 48823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Michigan State University	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Lannie Fisher		Date of Receipt
	Mailing Address 705 E. Baldwin St		09 16 2008
	City	State Zip Code	Transaction ID: SA11AI.6210
	St. Johns FEC ID number of contributing federal political committee.	MI 48879	Amount of Each Receipt this Period 50.00
	Name of Employer retired	Occupation teacher	Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	Spending (2 U.S.C. 441a(i)/441a-1)
	SUBTOTAL of Receipts This Page (optional)		425.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 10 / 81 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Statements may not be e name and address o	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Rosemary Franklin Mailing Address P O Box 262 City Grand Ledge FEC ID number of contributing federal political committee. Name of Employer State of Michigan Receipt For: 2008 Primary X General Other (specify)			Date of Receipt M M D D Q Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Rosemary Franklin Mailing Address P O Box 262 City Grand Ledge FEC ID number of contributing federal political committee. Name of Employer State of Michigan Receipt For: 2008 Primary X General Other (specify)			Date of Receipt M M
Full Name (Last, First, Middle Initial) Katherine R. Guins Mailing Address 4496 Dobie Road City Okemos FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: 2008 Primary X General Other (specify)		ip Code 8864 D-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			250.00

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 81 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14
\ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Katherine R. Guins		Date of Receipt
	Mailing Address 4496 Dobie Road	01-1- 7'- 0-1-	08 16 2008
	City Okemos	State Zip Code MI 48864	Transaction ID: SA11AI.5834 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Retired Receipt For: 2008	Occupation retired Election Cycle-to-Date	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	300.00	
	Full Name (Last, First, Middle Initial) Katherine R. Guins		Date of Receipt
	Mailing Address 4496 Dobie Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.6125
	Okemos	MI 48864	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Retired	Occupation retired	Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial) Emanuel Hackel		Date of Receipt
	Mailing Address 244 Oakland Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11Al.6218
	East Lansing	MI 48823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Retired	Occupation MSU Prof Medicine & Zoology	Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	Spending (2 U.S.C. 441a(i)/441a-1)
	SUBTOTAL of Receipts This Page (optional)		200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 81 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David Hayhow Mailing Address 360 Winterberry La. City Okemos FEC ID number of contributing federal political committee. Name of Employer Retired	State MI C Occupatio	Zip Code 48864	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2008 Primary X General Other (specify)	Retired Election C	Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Janice B. Hayhow Mailing Address 360 Winterberry Lane			Date of Receipt 0 8 0 6 2 0 0 8
City	State	Zip Code	Transaction ID: SA11AI.5819
Okemos FEC ID number of contributing federal political committee.	C	49964	Amount of Each Receipt this Period 250.00
Name of Employer self Receipt For: 2008 Primary X General Other (specify) ▼	Occupation retired Election C	Cycle-to-Date ▼ 250.00	ActBlue Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Kathleen M. Herrick	1		Date of Receipt
Mailing Address 2113 Long Leaf Trail			09 24 9008
City Okemos	State MI	Zip Code 48864	Transaction ID: SA11AI.6383 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Retired Social Worker Receipt For: 2008 Primary X General Other (specify) ▼	Occupation none Election C	Cycle-to-Date ▼ 400.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	•		700.00

	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 81 (check only one) X 11a 11b 11c 11d 11d 12 13a 13b 14 11
0	ny information copied from such Reports and r for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	Bob Alexander for Congress		
	Full Name (Last, First, Middle Initial) Wililam Hixon		Date of Receipt
	Mailing Address 1114 Sunset Lane		09 / 04 / 2008
	City	State Zip Code	Transaction ID: SA11AI.6062
	East Lansing	MI 48823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Retired	Occupation MSU Prof History	Limit Increased Due to Opponent's
	Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	300.00	
. –	Full Name (Last, First, Middle Initial) David C. Hollister		Date of Receipt
	Mailing Address 1943 Byrnes		09 / 30 / 4 9 9
	City	State Zip Code	Transaction ID: SA11AI.6458
	Lansing	MI 48906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Prima Civitas Foundation	Occupation Director	Limit Increased Due to Opponent's
	Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	250.00	
_	Full Name (Last, First, Middle Initial) Tracy E. Jensen		Date of Receipt
	Mailing Address 1125 Elkhorn Lake F	dd.	09 / 20 / Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.6359
	Lake Orion	MI 48362	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	157.00
	Name of Employer Self	Occupation Consulting	Jensen/Muzzy House Party Limit Increased Due to Opponent's
	Receipt For: 2008	Election Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼	307.00	
Γ			457.00

	HEDULE A (FEC Form 3) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 81 (check only one)
Any or fo	information copied from such Reports and S r commercial purposes, other than using the	tatements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
N	IAME OF COMMITTEE (In Full) Bob Alexander for Congress	name and add	areas or any pontion committee to	y solicit continuations from such committee.
	full Name (Last, First, Middle Initial)			Date of Descipt
_	Paula Johnson Mailing Address 3758 Chippendale			Date of Receipt
C	Sity	State	Zip Code	0 9 1 0 2 0 0 8 Transaction ID: SA11Al.6128
<u>C</u>	Okemos	MI	48864	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		100.00
N Ir	lame of Employer ngham County	Occupatio Register	n of Deeds	Limit Increased Due to Opponent's
R	Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 500.00	Spending (2 U.S.C. 441a(i)/441a-1)
	full Name (Last, First, Middle Initial) Dorothy D. Jones			Date of Receipt
N	Mailing Address 426 W. Barnes			09 04 2008
	City .	State	Zip Code	Transaction ID: SA11AI.6064
L	<u> </u>	MI	48910	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		100.00
N F	lame of Employer Retired Lansing Schools	Occupatio Teacher	n	Limit Increased Due to Opponent's
R	Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 350.00	Spending (2 U.S.C. 441a(i)/441a-1)
	rull Name (Last, First, Middle Initial) Dean E. Keith			Date of Receipt
N	Mailing Address 6633 Richardson Rd.			08 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.5956
_	lowell	MI	48843	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		300.00 ActBlue
N D	lame of Employer atura LLC	Occupatio Software	n Engineer	Limit Increased Due to Opponent's
R	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	Primary X General Other (specify) ▼		300.00]
	BTOTAL of Receipts This Page (optional)	<u> </u>		500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each cat	te schedule(s) regory of the mmary Page	FOR LINE NUMBER: PAGE 15 / 81 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Statements may not be sold or e name and address of any po	used by any perso litical committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Douglas Kelley			Date of Receipt
Mailing Address 910 Sunset City	State Zip Code		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ann Arbor FEC ID number of contributing federal political committee.	MI 48103		Amount of Each Receipt this Period 100.00
Name of Employer Retired Univ of Michigan Fli Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Director of Continuing Election Cycle-to-Date	·	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Claudia S. Kerbawy Mailing Address 1398 Hickory Island	1		Date of Receipt
City	State Zip Code		07 30 2008 Transaction ID: SA11AI.5626
<u>Haslett</u>	MI 48840		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer self	Occupation environmental consul	ting	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date	600.00	Speriding (2 0.5.0. 441a(I)/441a-1)
Full Name (Last, First, Middle Initial) Phillip Lamoureux	I		Date of Receipt
Mailing Address 505 N. Francis			09 24 2008
City	State Zip Code		Transaction ID: SA11Al.6394
Lansing	MI 48906		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer Michigan State Univ	Occupation Instructor		Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date	300.00	Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)			300.00

	CHEDULE A (FEC Form 3) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 81 (check only one) X
A 0	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Bob Alexander for Congress		
	Full Name (Last, First, Middle Initial) Andy Manni		Date of Receipt
	Mailing Address 4149 Luff Ct.		08 / 13 / 4 4 4 4
	City Okemos	State Zip Code MI 48864	Transaction ID: SA11AI.5752
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer Timesavers Gov't Consulti- ng Receipt For: 2008 □ Primary X General □ Other (specify) ▼	Occupation Consultant Election Cycle-to-Date 600.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial) Raven McCrory Mailing Address 15333 Club Course [Drive	Date of Receipt
			09 15 2008
	City Bath	State Zip Code MI 48808	Transaction ID: SA11AI.6428 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Michigan State University	Occupation faculty	ActBlue Limit Increased Due to Opponent's
	Receipt For: 2008 □ Primary X General □ Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial) Robert J. Miller		Date of Receipt
	Mailing Address 1438 Hitching Post F	Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.6259
	East Lansing FEC ID number of contributing federal political committee.	MI 48823	Amount of Each Receipt this Period 200.00
	Name of Employer Michigan State University	Occupation Physics Astronomy Researcher	ActBlue Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	Spending (2 U.S.C. 441a(i)/441a-1)
Г			900.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17/81 (check only one) X
Any information copied from such Reports	and Statements may not be sold or used by any pers	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bob Alexander for Congress	ig the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ann Nichols		Date of Receipt
Mailing Address 526 Forest Street	08 19 2008	
City	State Zip Code MI 48823	Transaction ID: SA11AI.5800
East Lansing FEC ID number of contributing federal political committee.	MI 48823	Amount of Each Receipt this Period 300.00
Name of Employer self Receipt For: 2008	Occupation attorney Election Cycle-to-Date	In-kind - legal services Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Primary X General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Milton B. Powell	Date of Receipt	
Mailing Address 6018 Horizon	09 24 2008	
City East Lansing	State Zip Code MI 48823	Transaction ID: SA11AI.6402
FEC ID number of contributing federal political committee.	C 40023	Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation MSU Prof Amer Thought & Langua	ge Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial)	I	Date of Receipt
Mailing Address 2621 Woodview		09 15 2008
City Lansing	State Zip Code MI 48911	Transaction ID: SA11AI.6225
FEC ID number of contributing federal political committee.	MI 48911	Amount of Each Receipt this Period 500.00
Name of Employer UAW Local 6000	Occupation President	Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify)	Election Cycle-to-Date 700.00	Spending (2 U.S.C. 441a(i)/441a-1)
SURTOTAL of Receipts This Page (option	nal)	1000.00

			500.00
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cyc		Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self	lame of Employer Occupation beauty con		Limit Increased Due to Opponent's
FEC ID number of contributing federal political committee.	C		300.00
City <u>East Lansing</u>	State MI	Zip Code 48823	Transaction ID: SA11AI.6093 Amount of Each Receipt this Period
Mailing Address 2423 Burcham Dr.		71.0	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Rosemary Smith	1		Date of Receipt
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cyc	cle-to-Date ▼ 250.00	Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation None		Limit Increased Due to Opponent's
FEC ID number of contributing federal political committee.	C		100.00
City East Lansing	State MI	Zip Code 48823	Transaction ID: SA11AI.6238 Amount of Each Receipt this Period
Peter A. Schroeder Mailing Address 807 Woodingham Dr.			09 16 YYYY 2008
Full Name (Last, First, Middle Initial)	1		Date of Receipt
Receipt For: 2008 Primary X General Other (specify) ▼	Election Cyc	cle-to-Date ▼ 300.00	Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Post Office	e Manager	Limit Increased Due to Opponent's
FEC ID number of contributing federal political committee.	C		100.00
City <u>Howell</u>	State MI	Zip Code 48843	Transaction ID: SA11AI.6466 Amount of Each Receipt this Period
Mailing Address 2690 Golf Club Rd	09 / 30 / Y Y Y Y Y Y		
Full Name (Last, First, Middle Initial) Nancy Sauvage			Date of Receipt
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
r for commercial purposes, other than using th	o solicit contributions from such committee.		
TEMIZED RECEIPTS In y information copied from such Reports and second s	Ohada wa suda wa su w	for each category of the Detailed Summary Page	X 11a 11b 11c 11d 11d 12 13a 13b 14
SCHEDULE A (FEC Form 3)		Use separate schedule(s)	(check only one)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/81 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) Bob Alexander for Congress		· ·	
Full Name (Last, First, Middle Initial) Daniel Suits			Date of Receipt
Mailing Address 1446 Karlin Court	M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O		
City East Lansing	State MI	Zip Code 48823	Transaction ID: SA11AI.6156 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Retired	Occupatio Retired		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Donald W. Twohy	Date of Receipt		
Mailing Address 2202 Haslett Rd			0 9 1 0 Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.6138
East Lansing	MI	48823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Retired	Occupatio Retired	n	Limit Increased Due to Opponent's
Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 250.00	Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) Elvira Wilbur			Date of Receipt
Mailing Address 5439 Wild Oak Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11Al.6224
East Lansing	MI	48823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Michigan State University	Occupatio Prof Hi	story	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 Primary X General Other (specify) ▼	Election C	Cycle-to-Date ▼ 210.00	Opending (2 0.0.0. 441a(1)/441a-1)
SUBTOTAL of Receipts This Page (optional)			1150.00

В.

PAGE 20 / 81 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Isabella Yardley Date of Receipt Mailing Address 482 Forest Dr. 0 8 04 2008 City State Zip Code Transaction ID: SA11AI.5648 **Brighton** MI 48116 Amount of Each Receipt this Period FEC ID number of contributing 10.00 C federal political committee. t-shirt Name of Employer retired Occupation Limit Increased Due to Opponent's retired Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date Primary X General 410.00 Other (specify) Full Name (Last, First, Middle Initial) Isabella Yardley Date of Receipt Mailing Address 482 Forest Dr. 0 9 19 2008 City State Zip Code Transaction ID: SA11AI.6279 **Brighton** MI 48116 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer retired Occupation retired Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date Primary X General

510.00

SUBTOTAL of Receipts This Page (optional)	•	110.00
TOTAL This Period (last page this line number only)	•	11542.00

Other (specify)

ľ	SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 81 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
	r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	Bob Alexander for Congress		
۷.	Full Name (Last, First, Middle Initial) Mid-Michigan Democracy for America Federal F	PAC	Date of Receipt
	Mailing Address 970 Lilac Ave.		09 / 08 / 2008
	City East Lansing	State Zip Code MI 48823	Transaction ID: SA11C.6077
	FEC ID number of contributing federal political committee.	C C00423913	Amount of Each Receipt this Period 125.00
	Name of Employer	Occupation	
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 125.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
_ 3.	Full Name (Last, First, Middle Initial) National Committee for an Effective Congress		Date of Receipt
	Mailing Address 122 C Street NW Suite 650		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Washington	State Zip Code DC 20001	Transaction ID: SA11C.5653
	FEC ID number of contributing federal political committee.	C C00003558	Amount of Each Receipt this Period 3000.00
	Name of Employer	Occupation	In-kind - Precinct Target- ing Limit Increased Due to Opponent's
	Receipt For: 2008 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	Spending (2 U.S.C. 441a(i)/441a-1)
_ ;.	Full Name (Last, First, Middle Initial) NATIONAL EDUCATION ASSOCIATION		Date of Receipt
-	Mailing Address 1201 16TH STREET	NW	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WASHINGTON	State Zip Code DC 20036	Transaction ID: SA11C.6207
	FEC ID number of contributing federal political committee.	C C30000848	Amount of Each Receipt this Period 500.00
	Name of Employer	Occupation	Limit Ingressed Due to Company
	Receipt For: 2008 Primary X General	Election Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Other (specify) ▼	500.00	
	SURTOTAL of Receipts This Page (optional)		3625.00

В.

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports and or for commercial purposes, other than using to the NAME OF COMMITTEE (In Full) Bob Alexander for Congress	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any pers he name and address of any political committee to	FOR LINE NUMBER: PAGE 22 / 81 (check only one) 11a 11b X 11c 11d 12 13a 13b 14 15 on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) UAW V CAP Mailing Address 8000 E. Jefferson Av	ve.	Date of Receipt 0 8 1 4 2 0 0 8
City	State Zip Code	
Detroit	MI 48214	Transaction ID: SA11C.5736 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00002840	5000.00
Name of Employer Receipt For: 2008 X Primary General Other (specify) ▼	Occupation Election Cycle-to-Date 5000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) UAW V CAP Mailing Address 8000 E. Jefferson Av	ve.	Date of Receipt 0 9 0 8 2 0 0 8
City	State Zip Code	
City Detroit	State Zip Code MI 48214	Transaction ID: SA11C.6076
FEC ID number of contributing federal political committee.	C C00002840	Amount of Each Receipt this Period 5000.00
Name of Employer Receipt For: 2008 Primary X General Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 10000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	•	13625.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 81 (check only one) 11a 11b 11c 11d 11d 15
Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Claudia S. Kerbawy Mailing Address 1398 Hickory Island City	State	Zip Code	Date of Receipt M
Haslett FEC ID number of contributing federal political committee.	C	48840	Amount of Each Receipt this Period 1700.00 Loan to campaign
Name of Employer self Receipt For: 2008 Primary X General Other (specify) ▼	,	ental consulting ycle-to-Date 2300.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	•	1700.00
TOTAL This Period (last page this line number only)	•	1700.00

В.

C.

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 24 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5826 Auburn Quad, Inc. ActBlue Date of Disbursement 10 0 8 2008 Mailing Address P. O. Box 390728 City State Zip Code Amount of Each Disbursement this Period Cambridge 02139 MA 40.30 Purpose of Disbursement Payment processor fee 003 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5886 Auburn Quad, Inc. ActBlue Date of Disbursement 0 8 2008 Mailing Address P. O. Box 390728 City State Zip Code Amount of Each Disbursement this Period Cambridge MA 02139 11.28 Purpose of Disbursement Service Fee 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6084 Auburn Quad, Inc. ActBlue Date of Disbursement 26 2008 Mailing Address P. O. Box 390728 City State Zip Code Amount of Each Disbursement this Period Cambridge MA 02139 7.91 Purpose of Disbursement Service fee 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

59.49

SUBTOTAL of Disbursements This Page (optional)

В.

C.

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 25 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5962 Auburn Quad, Inc. ActBlue Date of Disbursement 2 9 0 8 2008 Mailing Address P. O. Box 390728 City State Zip Code Amount of Each Disbursement this Period Cambridge MA 02139 21.15 Purpose of Disbursement Service fee 003 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6164 Auburn Quad, Inc. ActBlue Date of Disbursement 0 9 08 2008 Mailing Address P. O. Box 390728 City State Zip Code Amount of Each Disbursement this Period Cambridge MA 02139 78.05 Purpose of Disbursement service fee 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6267 Auburn Quad, Inc. ActBlue Date of Disbursement 2008 Mailing Address P. O. Box 390728 City State Zip Code Amount of Each Disbursement this Period Cambridge MA 02139 48.02 Purpose of Disbursement service fee 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 147.22 SUBTOTAL of Disbursements This Page (optional) \blacktriangleright

C.

age# 29991914390			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Auburn Quad, Inc. ActBlue Mailing Address P. O. Box 390728			Transaction ID: SB17.6494 Date of Disbursement
City Cambridge Purpose of Disbursement Service fee Candidate Name	State Zip Code MA 02139 sement For: 2008 Primary X General Other (specify)	003 Category/ Type	Amount of Each Disbursement this Period 11.28 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Auburn Quad, Inc. ActBlue Mailing Address P. O. Box 390728			Transaction ID: SB17.6449 Date of Disbursement M 9 M / D 2 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cambridge Purpose of Disbursement Service fee Candidate Name Office Sought: House Senate President State: District:	State Zip Code MA 02139 sement For: 2008 Primary X General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 28.68 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Auburn Quad, Inc. ActBlue Mailing Address P. O. Box 390728			Transaction ID: SB17.6495 Date of Disbursement
City Cambridge Purpose of Disbursement service fee Candidate Name Office Sought: House Senate President State: District:	State Zip Code MA 02139 sement For: 2008 Primary X General Other (specify)	003 Category/ Type	Amount of Each Disbursement this Period 27.29 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional))	67.25

C.

SCHEDULE B (FEC Form 3)		FOR LINE	NUMBER: PAGE 27/81
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	y one)
	Detailed Summary Page	-	X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	··		
Bob Alexander for Congress			
Full Name (Last, First, Middle Initial)			Transaction ID: SB17.5712
Amber Management Company			Date of Disbursement
Mailing Address 829 Southlawn			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & I \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & R \end{smallmatrix} \end{bmatrix}$
	State Zip Code MI 48823		Amount of Each Disbursement this Period
East Lansing Purpose of Disbursement	WII 40023		1300.00
rent		001	Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	ment For: 2008		
Senate President	Primary X General Other (specify) ▼		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB17.5509
Arialink			Date of Disbursement
Mailing Address 1223 Turner Street			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code MI 48906		Amount of Each Disbursement this Period
Purpose of Disbursement			312.50
phones/internet		003	Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate	ment For: 2008 Primary X General		
President	Other (specify)		
State: District:	, (1 3/ V		
Full Name (Last, First, Middle Initial)			Transaction ID: SB17.5517
AT&T			Date of Disbursement
Mailing Address 220 N. Capitol			$\begin{bmatrix} M & M & M \\ O & T & M \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ D & T \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & S \end{bmatrix} $
City Lansing	State Zip Code MI 48933		Amount of Each Disbursement this Period
Purpose of Disbursement	+0300		39.63
phone		001	Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate	ment For: 2008 Primary X General		
President	Other (specify)		
State: District:			
		_	1652.13
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	1032.13

В.

C.

SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 28 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6038 AT&T Date of Disbursement 11 0 8 2008 Mailing Address 220 N. Capitol City State Zip Code Amount of Each Disbursement this Period MI 48933 Lansing 223.03 Purpose of Disbursement Phone 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5988 AT&T Date of Disbursement 15 0 8 2008 Mailing Address 220 N. Capitol City State Zip Code Amount of Each Disbursement this Period 48933 Lansing ΜI 37.08 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6285 Date of Disbursement 05 ი‴ 9 2008 Mailing Address 220 N. Capitol City State Zip Code Amount of Each Disbursement this Period Lansing MI 48933 202.95 Purpose of Disbursement **Phones** 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 463.06

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SCHEDULE B (FEC Form 3)

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SCHEDULE B (FEC Form 3)

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 31/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5724 Katie Bileth Date of Disbursement 0 8 08 2008 Mailing Address 2187 Audley NE City State Zip Code Amount of Each Disbursement this Period **Grand Rapids** MI 49525 640.05 Purpose of Disbursement wages 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6043 Katie Bileth Date of Disbursement 2 2 0 8 2008 Mailing Address 2187 Audley NE City State Zip Code Amount of Each Disbursement this Period **Grand Rapids** 49525 MI 640.05 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6292 Katie Bileth Date of Disbursement 05 ი‴ 9 2008 Mailing Address 2187 Audley NE City State Zip Code Amount of Each Disbursement this Period **Grand Rapids** MI 49525 181.86 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Category/ Candidate Name 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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Any Information copied from such Reports and State or for commercial purposes, other than using the nar			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Katie Bileth			Transaction ID: SB17.6307 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2187 Audley NE			09 09 2008
City Grand Rapids	State Zip Code MI 49525		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name	10020	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President State: District:	sement For: 2008 Primary X General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) Katie Bileth Mailing Address 2187 Audley NE			Transaction ID: SB17.6347 Date of Disbursement M 9 M / D 1 9 / Y Y Y O Y 8 Y
City Grand Rapids	State Zip Code MI 49525		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name		001 Category/ Type	341.51 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	sement For: 2008 Primary X General Other (specify)	Турс	
State: District: Full Name (Last, First, Middle Initial) Cartridge World			Transaction ID: SB17.5723 Date of Disbursement
Mailing Address 2160 W. Grand River			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Okemos	State Zip Code MI 48864		Amount of Each Disbursement this Period
Purpose of Disbursement ink Candidate Name		004 Category/	78.90 Refund or Disposal of Excess Contributions Required Under
Office Sought: House Disburs Senate President	sement For: 2008 Primary X General Other (specify)	Type	11 C.F.R. 400.53
State: District:			
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FOR LINE NUMBER: PAGE 33 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5991 Cartridge World Date of Disbursement 14 0 8 2008 Mailing Address 2160 W. Grand River City State Zip Code Amount of Each Disbursement this Period Okemos MI 48864 73.14 Purpose of Disbursement 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5992 Cartridge World Date of Disbursement 2 2 0 8 2008 Mailing Address 2160 W. Grand River City State Zip Code Amount of Each Disbursement this Period 48864 Okemos MI 74.20 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6316 Cartridge World Date of Disbursement 10 2008 Mailing Address 2160 W. Grand River City State Zip Code Amount of Each Disbursement this Period Okemos MI 48864 66.20 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Category/ Candidate Name 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 34 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6500 Christensen & Associates Date of Disbursement 2 9 0 9 2008 Mailing Address 209 Pennsylvania Ave. SE City State Zip Code Amount of Each Disbursement this Period Washington, D.C. DC 20003 2000.00 Purpose of Disbursement fundraising 003 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6326 Clinton County Democrats Date of Disbursement 0 9 2008 Mailing Address 13105 Schavey Road City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 MI 135.00 Purpose of Disbursement rent 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5513 Comcast Date of Disbursement 2008 Mailing Address 203 N. Clippert Streer City State Zip Code Amount of Each Disbursement this Period Lansing MI 48912 200.00 Purpose of Disbursement internet 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 35 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6289 Comcast Date of Disbursement 05 0 9 2008 Mailing Address 203 N. Clippert Streer City State Zip Code Amount of Each Disbursement this Period MI 48912 Lansing 200.00 Purpose of Disbursement internet 003 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5998 ElectionMall.Com Date of Disbursement 15 0 8 2008 Mailing Address 1101 Pennsylvania Ave. NW 6th Floor City State Zip Code Amount of Each Disbursement this Period 20004 Washington DC 1469.15 Purpose of Disbursement Solicitation 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5700 Andrew C. Gerlach Date of Disbursement 2008 Mailing Address 2900 Beau Jardin Dr. Apt. 104 City State Zip Code Amount of Each Disbursement this Period Lansing MI 48910 614.00 Purpose of Disbursement wages 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Andrew C. Gerlach			Transaction ID: SB17.5725 Date of Disbursement
Mailing Address 2900 Beau Jardin Dr. Apt. 104			$\begin{bmatrix} M & M & M \\ O & B & M \end{bmatrix} / \begin{bmatrix} D & D \\ O & B \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & O & 0 & B \end{bmatrix}$
Senate President State: District: Full Name (Last, First, Middle Initial)	State Zip Code MI 48910 sement For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 614.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 Transaction ID: SB17.6044
Andrew C. Gerlach Mailing Address 2900 Beau Jardin Dr. Apt. 104			Date of Disbursement M 8 M / D D D / Y Y Y O O 8 Y
City Lansing Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District:	State Zip Code MI 48910 sement For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 614.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Andrew C. Gerlach Mailing Address 2900 Beau Jardin Dr.			Transaction ID: SB17.6294 Date of Disbursement M 9 M / D D D / Y Y Y O N 8 Y
Apt. 104 City Lansing Purpose of Disbursement Salary Candidate Name	State Zip Code MI 48910 Rement For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 322.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 37 / 81 / one) X 17
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NAME OF COMMITTEE (In Full) Bob Alexander for Congress	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Full Name (Last, First, Middle Initial) Andrew C. Gerlach Mailing Address 2900 Beau Jardin Dr.			Transaction ID: SB17.6308 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Apt. 104	State Zip Code MI 48910		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name Office Sought: House Senate President State: District:	ment For: 2008 Primary X General Other (specify)	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Andrew C. Gerlach Mailing Address 2900 Beau Jardin Dr. Apt. 104			Transaction ID: SB17.6332 Date of Disbursement M 9 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Lansing Purpose of Disbursement polling Candidate Name	State Zip Code MI 48910 ment For: 2008 Primary X General Other (specify) The code of th	005 Category/ Type	Amount of Each Disbursement this Period 111.44 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Andrew C. Gerlach Mailing Address 2900 Beau Jardin Dr.			Transaction ID: SB17.6348 Date of Disbursement M 9 M / D 1 9 / Y Y O 0 8
Lansing Purpose of Disbursement salary Candidate Name	State Zip Code MI 48910 The ment For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 614.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SCHEDULE B (FEC Form 3)

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 39/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5997 Eboney R. Hughes Date of Disbursement 2 2 0 8 2008 Mailing Address 201 S. Waverly Rd. City State Zip Code Amount of Each Disbursement this Period MI 48917 Lansing 83.11 Purpose of Disbursement 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6295 Eboney R. Hughes Date of Disbursement 05 0 9 2008 Mailing Address 201 S. Waverly Rd. City State Zip Code Amount of Each Disbursement this Period 48917 Lansing MI 211.05 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6309 Eboney R. Hughes Date of Disbursement ი‴ 9 0 9ั 2008 Mailing Address 201 S. Waverly Rd. City State Zip Code Amount of Each Disbursement this Period Lansing MI 48917 172.05 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Category/ Candidate Name 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 466.21

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FOR LINE NUMBER: PAGE 41/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5512 Kaitlin McCue Photography Date of Disbursement 2008 Mailing Address 11782 Sara Ann Dr. City State Zip Code Amount of Each Disbursement this Period DeWitt MI 48820 545.50 Purpose of Disbursement photography 004 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6498 Kaitlin McCue Photography Date of Disbursement 25 0 9 2008 Mailing Address 11782 Sara Ann Dr. City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 MI 700.00 Purpose of Disbursement photos 004 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5702 Claudia S. Kerbawy Date of Disbursement 2008 Mailing Address 1398 Hickory Island City State Zip Code Amount of Each Disbursement this Period Haslett MI 48840 1197.11 Purpose of Disbursement wages 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 2442.61

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 42/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5727 Claudia S. Kerbawy Date of Disbursement 0 8 08 2008 Mailing Address 1398 Hickory Island City State Zip Code Amount of Each Disbursement this Period MI 48840 Haslett 1197.11 Purpose of Disbursement wages 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6045 Claudia S. Kerbawy Date of Disbursement 2 2 0 8 2008 Mailing Address 1398 Hickory Island City State Zip Code Amount of Each Disbursement this Period Haslett 48840 MI 1197.11 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6310 Claudia S. Kerbawy Date of Disbursement ი‴ 9 0 9ั 2008 Mailing Address 1398 Hickory Island City State Zip Code Amount of Each Disbursement this Period Haslett MI 48840 1197.11 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Category/ Candidate Name 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

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FOR LINE NUMBER: PAGE 43/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6350 Claudia S. Kerbawy Date of Disbursement 19 0 9 2008 Mailing Address 1398 Hickory Island City State Zip Code Amount of Each Disbursement this Period MI 48840 Haslett 1197.11 Purpose of Disbursement salary 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5703 Theresa Kidd Date of Disbursement 25 ö́7 2008 Mailing Address 5115 Clise Road City State Zip Code Amount of Each Disbursement this Period 48808 Bath MI 342.77 Purpose of Disbursement wages 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5728 Theresa Kidd Date of Disbursement 08 2008 Mailing Address 5115 Clise Road City State Zip Code Amount of Each Disbursement this Period Bath MI 48808 381.76 Purpose of Disbursement wages 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 1921.64

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 44/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6046 Theresa Kidd Date of Disbursement 2 2 0 8 2008 Mailing Address 5115 Clise Road City State Zip Code Amount of Each Disbursement this Period MI 48808 Bath 420.77 Purpose of Disbursement 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6296 Theresa Kidd Date of Disbursement 05 0 9 2008 Mailing Address 5115 Clise Road City State Zip Code Amount of Each Disbursement this Period 48808 Bath ΜI 220.00 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6311 Theresa Kidd Date of Disbursement ი‴ 9 0 9ั 2008 Mailing Address 5115 Clise Road City State Zip Code Amount of Each Disbursement this Period Bath MI 48808 219.99 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 860.76

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 45/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6351 Theresa Kidd Date of Disbursement 19 0 9 2008 Mailing Address 5115 Clise Road Citv State Zip Code Amount of Each Disbursement this Period 48808 Bath ΜI 420.77 Purpose of Disbursement salary 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6287 Lansing Board of Water and Light Date of Disbursement 05 0 9 2008 Mailing Address P.O. Box 13007 City State Zip Code Amount of Each Disbursement this Period 48901 Lansing ΜI 393.04 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6343 Lansing Board of Water and Light Date of Disbursement 2008 Mailing Address P.O. Box 13007 City State Zip Code Amount of Each Disbursement this Period Lansing MI 48901 44.94 Purpose of Disbursement water 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 858.75

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 46 / 81 y one) X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Lansing Board of Water and Light			Transaction ID: SB17.6344 Date of Disbursement
Mailing Address P.O. Box 13007			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & P \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & 8 \end{smallmatrix} \end{bmatrix} $
City Lansing Purpose of Disbursement electric utility Candidate Name Office Sought: House Senate President State: District:	State Zip Code MI 48901 sement For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 259.07 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Michael Masterson Mailing Address 4562 Seneca Drive			Transaction ID: SB17.5704 Date of Disbursement O 7 P 2 5 Y Y Y Y O Y 8
City Okemos Purpose of Disbursement wages Candidate Name Office Sought: House Senate President State: District:	State Zip Code MI 48864 sement For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 806.24 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) Michael Masterson Mailing Address 4562 Seneca Drive			Transaction ID: SB17.5729 Date of Disbursement O 8 M / D B / Y Y Y O N 8 Y
City Okemos Purpose of Disbursement wages Candidate Name Office Sought: House Senate President State: District:	State Zip Code MI 48864 sement For: 2008 Primary X General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 806.24 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 47/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6047 Michael Masterson Date of Disbursement 2 2 0 8 2008 Mailing Address 4562 Seneca Drive City State Zip Code Amount of Each Disbursement this Period MI 48864 Okemos 806.24 Purpose of Disbursement 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6297 Michael Masterson Date of Disbursement 05 0 9 2008 Mailing Address 4562 Seneca Drive City State Zip Code Amount of Each Disbursement this Period 48864 Okemos MI 806.24 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6353 Michael Masterson Date of Disbursement 2008 Mailing Address 4562 Seneca Drive City State Zip Code Amount of Each Disbursement this Period Okemos MI 48864 806.24 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 48 / 81 y one) X 17 18 19a 19b
Any Information copied from such Reports and Staten	pents may not be sold or used	by any person f	20a 20b 20c 21
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) McAlpine Computer			Transaction ID: SB17.6324 Date of Disbursement
Mailing Address 712 Abbott Rd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix} $
City East Lansing	State Zip Code MI 48823		Amount of Each Disbursement this Period
Purpose of Disbursement computer Candidate Name		001 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburse Senate President State: District:	ement For: 2008 Primary X General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) Mathew A. McPeak			Transaction ID: SB17.5705 Date of Disbursement 0 7
Mailing Address 3830 Winsome Way			20 200
DeWitt	State Zip Code MI 48820		Amount of Each Disbursement this Period
Purpose of Disbursement wages		001	Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: 2008 Primary X General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Mathew A. McPeak			Transaction ID: SB17.5730 Date of Disbursement
Mailing Address 3830 Winsome Way			$\begin{bmatrix} M & M & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City DeWitt	State Zip Code MI 48820		Amount of Each Disbursement this Period
Purpose of Disbursement wages Candidate Name		001 Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: 2008 Primary X General Other (specify)	Туре	
State: District:			
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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 49/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6048 Mathew A. McPeak Date of Disbursement 2 2 0 8 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt MI 48820 640.05 Purpose of Disbursement 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6298 Mathew A. McPeak Date of Disbursement 05 0 9 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 MI 341.51 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6312 Mathew A. McPeak Date of Disbursement ი‴ 9 0 9ั 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt MI 48820 341.51 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 50 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6354 Mathew A. McPeak Date of Disbursement 1 9 0 9 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 ΜI 640.05 Purpose of Disbursement salary 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5514 McPeak Media Date of Disbursement 0 7 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 MI 6780.86 Purpose of Disbursement technology support/administration 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6041 McPeak Media Date of Disbursement 20 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt MI 48820 40.00 Purpose of Disbursement 004 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 7460.91

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 51/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6327 McPeak Media Date of Disbursement 0 9 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 ΜI 195.00 Purpose of Disbursement advertising 004 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6358 McPeak Media Date of Disbursement 0 9 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt 48820 MI 1000.00 Purpose of Disbursement 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6499 McPeak Media Date of Disbursement 2008 Mailing Address 3830 Winsome Way City State Zip Code Amount of Each Disbursement this Period DeWitt MI 48820 1382.35 Purpose of Disbursement Advertising 004 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	
Any Information copied from such Reports and States or for commercial purposes, other than using the name.			
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Lydia Mitchell			Transaction ID: SB17.6049 Date of Disbursement
Mailing Address 3535 Green Brier Blvd. 36A			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & R \end{smallmatrix} \end{bmatrix}$
City Ann Arbor	State Zip Code MI 48105		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name Office Sought: House Disburs	ement For: 2008	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President State: District:	Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Lydia Mitchell			Transaction ID: SB17.6299 Date of Disbursement
Mailing Address 3535 Green Brier Blvd. 36A			0 9 0 5 7 2 0 0 8
City Ann Arbor	State Zip Code MI 48105		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name		001 Category/ Type	322.00 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	ement For: 2008 Primary X General Other (specify)	.,,,,	
State: District: Full Name (Last, First, Middle Initial) Lydia Mitchell			Transaction ID: SB17.6313 Date of Disbursement
Mailing Address 3535 Green Brier Blvd. 36A			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City Ann Arbor	State Zip Code MI 48105		Amount of Each Disbursement this Period
Purpose of Disbursement salary		001	322.00 Refund or Disposal of Excess
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disburs Senate President	ement For: 2008 Primary X General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			1258.00

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SCHEDULE B (FEC Form 3)

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FOR LINE NUMBER: PAGE 53 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6355 Lydia Mitchell Date of Disbursement 19 0 9 2008 Mailing Address 3535 Green Brier Blvd. 36A City State Zip Code Amount of Each Disbursement this Period Ann Arbor MI 48105 614.00 Purpose of Disbursement salary 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6009 MSU Federal Credit Union Date of Disbursement 0 8 2008 Mailing Address 3777 West Road City State Zip Code Amount of Each Disbursement this Period East Lansing 48823 MI 488.00 Purpose of Disbursement Car payment Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6317 MSU Federal Credit Union Date of Disbursement 10 2008 Mailing Address 3777 West Road City State Zip Code Amount of Each Disbursement this Period East Lansing MI 48823 488.00 Purpose of Disbursement car payment 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 1590.00

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 54 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5655 National Committee for an Effective Congress Date of Disbursement 06 0 8 2008 Mailing Address 122 C Street NW Suite 650 City State Zip Code Amount of Each Disbursement this Period Washington DC 20001 3000.00 Purpose of Disbursement In-kind - Precinct Targeting Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5715 Ann Nichols Date of Disbursement 05 0 8 2008 Mailing Address 526 Forest Street City State Zip Code Amount of Each Disbursement this Period 48823 East Lansing MI 280.00 Purpose of Disbursement contracted services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5982 Ann Nichols Date of Disbursement 18 2008 Mailing Address 526 Forest Street City State Zip Code Amount of Each Disbursement this Period East Lansing MI 48823 800.00 Purpose of Disbursement contracted PR services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 55 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5801 Ann Nichols Date of Disbursement 1 9 0 8 2008 Mailing Address 526 Forest Street City State Zip Code Amount of Each Disbursement this Period MI 48823 East Lansing 300.00 Purpose of Disbursement In-kind - legal services Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6286 Ann Nichols Date of Disbursement 05 0 9 2008 Mailing Address 526 Forest Street City State Zip Code Amount of Each Disbursement this Period 48823 East Lansing MI 400.00 Purpose of Disbursement contracted PR services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6306 Ann Nichols Date of Disbursement ი‴ 9 0 9ั 2008 Mailing Address 526 Forest Street City State Zip Code Amount of Each Disbursement this Period East Lansing MI 48823 400.00 Purpose of Disbursement contracted PR services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 56 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6341 Ann Nichols Date of Disbursement 19 0 9 2008 Mailing Address 526 Forest Street City State Zip Code Amount of Each Disbursement this Period MI 48823 East Lansing 800.00 Purpose of Disbursement contracted PR services 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6017 Ryan Norton Date of Disbursement 2 9 0 8 2008 Mailing Address 132 Lincoln St. City State Zip Code Amount of Each Disbursement this Period 49068 Marshall MI 600.00 Purpose of Disbursement camera op 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6342 Ryan Norton Date of Disbursement 2008 Mailing Address 132 Lincoln St. City State Zip Code Amount of Each Disbursement this Period Marshall MI 49068 100.00 Purpose of Disbursement video 003 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 1500.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 57 / 81 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5706 Jaime Perilla Date of Disbursement 25 0 7 2008 Mailing Address 643 Lexington City State Zip Code Amount of Each Disbursement this Period MI 48823 East Lansing 322.00 Purpose of Disbursement wages 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5731 Jaime Perilla Date of Disbursement 0 8 08 2008 Mailing Address 643 Lexington City State Zip Code Amount of Each Disbursement this Period East Lansing 48823 MI 322.00 Purpose of Disbursement wages 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6051 Jaime Perilla Date of Disbursement 2008 Mailing Address 643 Lexington City State Zip Code Amount of Each Disbursement this Period East Lansing MI 48823 322.00 Purpose of Disbursement 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 966.00 SUBTOTAL of Disbursements This Page (optional) ... \blacktriangleright

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 58 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6300 Jaime Perilla Date of Disbursement 05 0 9 2008 Mailing Address 643 Lexington City State Zip Code Amount of Each Disbursement this Period 48823 East Lansing ΜI 166.19 Purpose of Disbursement salary 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6314 Jaime Perilla Date of Disbursement 0 9 0 9 2008 Mailing Address 643 Lexington City State Zip Code Amount of Each Disbursement this Period East Lansing 48823 MI 166.19 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6356 Jaime Perilla Date of Disbursement 2008 Mailing Address 643 Lexington City State Zip Code Amount of Each Disbursement this Period East Lansing MI 48823 322.00 Purpose of Disbursement salary 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 654.38

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 59 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.8365 **RJF** Photography Date of Disbursement 0 8 28 2008 Mailing Address 538 Allen Street City State Zip Code Amount of Each Disbursement this Period 48912 Lansing ΜI 359.50 Purpose of Disbursement photography services 004 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 **Bob Alexander for Congress** Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) State: MI District: 08 Full Name (Last, First, Middle Initial) Transaction ID: SB17.5515 Simplified Accounting & Tax Service, Inc. Date of Disbursement o 7 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period 48910 Lansing MI 687.50 Purpose of Disbursement accounts payable 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5709 Simplified Accounting & Tax Service, Inc. Date of Disbursement 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period Lansing MI 48910 50.00 Purpose of Disbursement payroll services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 1097.00 SUBTOTAL of Disbursements This Page (optional) ...

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 60/81 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.5733 Simplified Accounting & Tax Service, Inc. Date of Disbursement 0 8 08 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period 48910 Lansing ΜI 45.00 Purpose of Disbursement payroll services 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6018 Simplified Accounting & Tax Service, Inc. Date of Disbursement 2 2 0 8 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period 48910 Lansing MI 50.00 Purpose of Disbursement payroll 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6302 Simplified Accounting & Tax Service, Inc. Date of Disbursement 05 ი‴ 9 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period Lansing MI 48910 50.00 Purpose of Disbursement payroll services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 145.00 SUBTOTAL of Disbursements This Page (optional) ... \blacktriangleright

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 61/81 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6315 Simplified Accounting & Tax Service, Inc. Date of Disbursement 0 9 0 9 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period 48910 Lansing ΜI 45.00 Purpose of Disbursement payroll services 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6323 Simplified Accounting & Tax Service, Inc. Date of Disbursement 0 9 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period 48910 Lansing MΙ 900.00 Purpose of Disbursement rent 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6357 Simplified Accounting & Tax Service, Inc. Date of Disbursement 2008 Mailing Address 4305 S. Cedar St. City State Zip Code Amount of Each Disbursement this Period Lansing MI 48910 45.00 Purpose of Disbursement payroll services 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 990.00 SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 62/81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6021 Speedway Date of Disbursement 3 1้ 0 8 2008 Mailing Address 111 W. Lake Lansing Rd. City State Zip Code Amount of Each Disbursement this Period 48823 East Lansing ΜI 65.97 Purpose of Disbursement 002 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5518 Sprint Date of Disbursement 0 7 2008 Mailing Address P.O. Box 660075 City State Zip Code Amount of Each Disbursement this Period 75266 Dallas TΧ 223.01 Purpose of Disbursement phone 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6024 Sprint Date of Disbursement 2008 Mailing Address P.O. Box 660075 City State Zip Code Amount of Each Disbursement this Period Dallas TX 75266 87.86 Purpose of Disbursement phone 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 376.84

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 63 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6345 Sprint Date of Disbursement 19 0 9 2008 Mailing Address P.O. Box 660075 Zip Code City State Amount of Each Disbursement this Period TX 75266 Dallas 93.68 Purpose of Disbursement phone 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.5719 Staples Date of Disbursement 07 0 8 2008 Mailing Address 3003 E. Michigan Avenue City State Zip Code Amount of Each Disbursement this Period 48912 Lansing MI 61.44 Purpose of Disbursement campaign materials 006 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6025 Staples Date of Disbursement 2008 Mailing Address 3003 E. Michigan Avenue City State Zip Code Amount of Each Disbursement this Period Lansing MI 48912 25.40 Purpose of Disbursement office supplies 001 Refund or Disposal of Excess Contributions Required Under Category/ Candidate Name 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3)

FOR LINE NUMBER: PAGE 64 / 81 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6026 Staples Date of Disbursement 14 0 8 2008 Mailing Address 3003 E. Michigan Avenue City State Zip Code Amount of Each Disbursement this Period MI 48912 Lansing 28.60 Purpose of Disbursement office supplies 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6027 Staples Date of Disbursement 19 0 8 2008 Mailing Address 3003 E. Michigan Avenue City State Zip Code Amount of Each Disbursement this Period 48912 Lansing MI 199.26 Purpose of Disbursement office supplies 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6028 Staples Date of Disbursement 2008 Mailing Address 3003 E. Michigan Avenue City State Zip Code Amount of Each Disbursement this Period Lansing MI 48912 31.55 Purpose of Disbursement office supplies 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District:

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 65 / 81 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6496 Staples Date of Disbursement 2 4 0 9 2008 Mailing Address 3003 E. Michigan Avenue City State Zip Code Amount of Each Disbursement this Period 48912 Lansing ΜI 15.88 Purpose of Disbursement office supplies 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB17.8374 U.S. Treasury Date of Disbursement 0 8 28 2008 Mailing Address P.O. Box 70503 City State Zip Code Amount of Each Disbursement this Period Charlotte 28201 NC 3063.28 Purpose of Disbursement payroll withholding tax July 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 **Bob Alexander for Congress** Type 2008 Office Sought: House Disbursement For: Senate X Primary General President Other (specify) District: 08 State: MI Full Name (Last, First, Middle Initial) Transaction ID: SB17.8375 U.S. Treasury Date of Disbursement 18 2008 Mailing Address P.O. Box 70503 City State Zip Code Amount of Each Disbursement this Period Charlotte NC 28201 3032.67 Purpose of Disbursement payroll withholding tax August 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 **Bob Alexander for Congress** Type Office Sought: χ House Disbursement For: 2008 Primary X General Senate

Other (specify)

President

District: 08

6111.83

State: MI

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 66 / 81 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6034 U S Postal Service Date of Disbursement 19 0 8 2008 Mailing Address Merrill Street City State Zip Code Amount of Each Disbursement this Period 48912 Lansing ΜI 126.00 Purpose of Disbursement postage 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6035 U S Postal Service Date of Disbursement 19 0 8 2008 Mailing Address Merrill Street City State Zip Code Amount of Each Disbursement this Period 48912 Lansing ΜI 2.36 Purpose of Disbursement postage 001 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6335 U S Postal Service Date of Disbursement 2008 Mailing Address Merrill Street City State Zip Code Amount of Each Disbursement this Period Lansing MI 48912 42.00 Purpose of Disbursement postage 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 170.36

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 67/81 Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Full Name (Last, First, Middle Initial) Transaction ID: SB17.6321 Verizon Date of Disbursement 0 9 2008 Mailing Address 209 E. Grand River City State Zip Code Amount of Each Disbursement this Period MI 48823 East Lansing 124.19 Purpose of Disbursement phone 001 Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: 2008 Disbursement For: House X General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6033 Video Professionals Date of Disbursement 0 8 2 Ŏ 2008 Mailing Address 2707 E. Kalamazoo City State Zip Code Amount of Each Disbursement this Period 48912 Lansing MI 500.00 Purpose of Disbursement 004 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type 2008 Office Sought: House Disbursement For: Senate Primary X General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: SB17.6319 Voter Contact Services Date of Disbursement 2008 Mailing Address no street address City State Zip Code Amount of Each Disbursement this Period Sunnydale CA 94087 598.04 Purpose of Disbursement Polling 005 Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) State: District: 1222.23 SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	NUMBER: PAGE 68 / 81 y one) X 17 18 19a 19b 20a 20b 20c 21
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Bob Alexander for Congress			
Full Name (Last, First, Middle Initial) Erik J. Walton			Transaction ID: SB17.5708 Date of Disbursement
Mailing Address 213 S. Holmes St.			$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 5 \\ 2 & 5 \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 4 \\ 2 & 2 & 0 & 0 \\ 0 & 8 & M \end{bmatrix}$
City Lansing	State Zip Code MI 48912		Amount of Each Disbursement this Period
Purpose of Disbursement wages Candidate Name	sement For: 2008	001 Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President State: District:	Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) Erik J. Walton Mailing Address 213 S. Holmes St.			Transaction ID: SB17.5732 Date of Disbursement M M M / D D D / Y Y Y O D B Y 2 0 0 8
City Lansing	State Zip Code MI 48912		Amount of Each Disbursement this Period
Purpose of Disbursement wages Candidate Name		001 Category/ Type	259.60 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Senate President	sement For: 2008 Primary X General Other (specify) ▼	.,,,,,	
State: District:			
Full Name (Last, First, Middle Initial) Erik J. Walton			Transaction ID: SB17.6301 Date of Disbursement
Mailing Address 213 S. Holmes St.			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y \\ Z \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} Y \\ S \end{smallmatrix} \begin{smallmatrix} Y \\ O \end{smallmatrix} \begin{smallmatrix} Y \\ S \end{smallmatrix} $
City Lansing	State Zip Code MI 48912		Amount of Each Disbursement this Period
Purpose of Disbursement salary Candidate Name		001 Category/ Type	325.91 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: House Disbur Senate President State: District:	sement For: 2008 Primary X General Other (specify)		
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SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE C (FEC Form 3) PAGE 69/81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.5179 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Judith White Bridger X Primary General Mailing Address Other (specify) 831 Collingwood City East Lansig State MI ZIP Code 48823 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 2000.00 0.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 25 0 6 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 0.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 70 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.7631 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Melisa Buie X Primary General Mailing Address Other (specify) 165 E. O'Keefe St. City Menlo Park State CA ZIP Code 94025 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 1000.00 1000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 7 2008 none 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 1000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 71 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.5180 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Ronald C. Callen X Primary General Mailing Address Other (specify) 501 McPherson Ave. City Lansing State MI ZIP Code 48915 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 100.00 0.00 **TERMS** Date Due Interest Rate Secured: Date Incurred D 1 25 0 6 2008 09/25/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 100.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 72/81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.5427 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Karen M. Conroy X Primary General Mailing Address Other (specify) 2151 Beechnut Tr. City Holt State MI ZIP Code 48842 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 200.00 200.00 0.00 **TERMS** Secured: Date Due Interest Rate Date Incurred 1 3 0 7 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 200.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 73 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.6070 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Claudia S. Kerbawy Primary X General Other (specify) Mailing Address 1398 Hickory Island City Haslett State MI ZIP Code 48840 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1700.00 1700.00 0.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 9 0 5 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 1700.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 74/81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.5273 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Terry P. Link X Primary General Mailing Address Other (specify) 8767 E. Price Rd. City Laingsburg State MI ZIP Code 48848 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 500.00 500.00 **TERMS** Secured: Date Due Interest Rate Date Incurred м [©] 03 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 500.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 75 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.5095 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Frank D. McAlpine X Primary General Mailing Address Other (specify) 712 Abbott Road City East Lansing State MI ZIP Code 48823 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 2000.00 2000.00 0.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 6 2008 10/01/2008 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2000.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 76 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.4976 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Michael J. McPeak X Primary General Mailing Address Other (specify) 3830 Winsome Way City DeWitt State MI ZIP Code 48820 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 2300.00 2300.00 0.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 0 6 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2300.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 77 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.4978 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Susan McPeak X Primary General Mailing Address Other (specify) 3830 Winsome Way City DeWitt State MI ZIP Code 48820 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 600.00 600.00 0.00 **TERMS** Secured: Date Due Interest Rate Date Incurred 0 6 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 600.00 SUBTOTALS This Period This Page (optional)00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) PAGE 78 / 81 Use separate schedule(s) FOR LINE NUMBER: for each category of the LOANS (check only one) 13a **Detailed Summary Page** 13b NAME OF COMMITTEE (In Full) **Bob Alexander for Congress** Transaction ID: SC/10.5328 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: James B. Swonk X Primary General Mailing Address Other (specify) 10481 Skeman Rd. City Brighton State MI ZIP Code 48114 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 300.00 300.00 0.00 **TERMS** Secured: Date Due Interest Rate Date Incurred м [©] 0 9 2008 on demand 0.0000 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 300.00 SUBTOTALS This Period This Page (optional) 8700.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 29991914443

Form/Schedule: F3A Transaction ID:	Judith Bridger converted \$250 of loan to contribution 9/10/08
Form/Schedule: SC/10 Transaction ID: SC/10.5179	Judith Bridger asked to convert \$250 from loan to contribution 9/10/2008.(Current loan balance of 2000.00 has been forgiven)

Image# 29991914444

Image# 29991914444		
Form/Schedule: SC/10 Transaction ID: SC/10.5180	(Current loan balance of 100.00 has been forgiven)	
Form/Schedule:SC/10	(Current loan balance of 200.00 has been forgiven)	
Form/Schedule: SC/10 Transaction ID: SC/10.5427	(Current loan balance of 200.00 has been forgiven)	
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Form/Schedule: SC/10 Transaction ID: SC/10.5273	(Current loan balance of 500.00 has been forgiven)
Form/Schedule:SC/10 Transaction ID: SC/10.5328	(Current loan balance of 300.00 has been forgiven)
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